Effective on 12/08/2004.					Complete if Known					
·	the Consolidated Ap	_ · _ ·			Application Nun	nber	09/665,065-Cd		4	
FEE TRANSMITTAL For FY 2008							September 19, 2000			
						Kamel Shaath				
[V] A#					Examiner Name		C. L. Gilligan	····		
	nt claims small entity	<del>.</del>			Art Unit		3626			
TOTAL AMOUN	T OF PAYMENT	(\$)	720.00		Attomey Docket	No.	38898-172161			
METHOD OF	PAYMENT (ch	neck all that	apply)							
Check	Credit Card	Mon	ey Order	Nor	ne Other (	(please ident	ify):			
X Deposit Ac	count Deposit Acc	count Number:_	22-0	0261	Deposit	Account Nam	ne: Vei	nable LLF	5	
For the	above-identified	deposit acc	ount, the Di	rector is	hereby authorize	ed to: (che	eck all that apply)			
x C	harge fee(s) indic	cated below			Charg	e fee(s) ir	ndicated below, ex	kcept for t	he filing fee	
	harge any additio e(s) under 37 CF			nents of	f x Credit	any overp	payments			
FEE CALCU	LATION									
1. BASIC FILIN	IG, SEARCH, AN								*	
		FILING F	_	SE/	ARCH FEES	EXAMI	NATION FEES	-		
Application T	<u>ype Fe</u>		all Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)	
Utility	3	310	155	510	255	210	105			
Design	2	210	105	100	50	130	65			
Plant	2	210	105	310	155	160	80			
Reissue	. 3	310	155	510	255	620	310			
Provisional	2	210	105	0	0	0	0			
2. EXCESS CLA	AIM FEES								Small Entity	
Fee Description Each claim over	r 20 (including R	≀eissues)						Fee (\$) 50	<u>Fee (\$)</u> 25	
	ent claim over 3 (	•	eissues)					210	105	
Multiple depend		,						370	185	
Total Claims	Extra Claim	ns Fee (	\$)	Fee F	Paid (\$)	N	lultiple Depende			
	- 20 =	x	_ = _					ee Paid (	-	
HP = highest num	ber of total claims pa	-	r than 20.							
Indep. Claims	Extra Claim	ns Fee (	\$) =	Fee P	Paid (\$)					
	ber of independent cl		if greater than	1 3.						
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	100 =	/50 =	-		(round <b>up</b> to a who	ıle number)	x=			
4. OTHER FEE(								Fees	Paid (\$)	
_	Specification,	-		•	•					
Other (e.g., I	ate filing surchar	rge): 2501	Utility iss	ue fee				72	20.00	
SUBMITTED BY			<i></i>							
Signature	(Ruole)	Seall	<i>[</i>		Registration No. (Attorney/Agent)	56,784	Telephone	(703) 76	0-1676	
Name (Print/Type)	Caroline J. 🐝	vindell					Date	March 26	6, 2008	

	•	Attorney/LAA	
Venable Filing Number		PTO Due Date	
Atty. Docket No:	38898-172161	Current Date	
Title of Application:	METHOD AND SYSTEM FOR ELECTR	· · · · · · · · · · · · · · · · · · ·	
Application No:	09/665,065	Filing Date	
Patent No. :		Issue Date	P:
The following items were	received from Venable LLP, Washingto on the date stamped he	reon:	
		<u>u.s.</u>	PTO FEES ENCLOSED
_ Transmittal Letter			Filing Fee
_ Fee Transmittal Letter			
New U.S. Patent Application			Search Fee
_ ( pages of specification	•		
Rule 53(d) Continued Pros	• • • • •		Examination Fee
<ul><li>Rule 53(b) Continuation or</li></ul>	• •		
(attach copy of specifica	tion, claims, drawings and declaration)		Additional Claim Fee
U.S. National Stage Applic	ation of PCT Application		
Request for Continued Exa	amination (RCE) under 37 CFR 1.114		Extension Fee
Application Data Sheet			
Substitute Specification			IDS Fee
Priority Document-Cert. Co	ppy of		
; Country:;	• •		Recordation Fee
Formal Drawings ( she		4	
Inventor Declaration	34,		Notice of Appeal Fee
Assignment w/Cover Shee	t		
Response to Notice to File			Brief on Appeal
Response to Notice to File			Bilet on Appear
Response to Requirement	•		Oral Hearing Request Fee
	tement with cited references		Orai Flearing Request Fee
Response	tement with Cited references		Petition Fee
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_	inary Amendment	720.00	Janua Can
Petition/Request for Extens	sion of fille ( mo. ext.)	720.00	Issue Fee
Power of Attorney			Dublingtion For
Petition to Revive	Spalana dO V N-		Publication Fee
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Request for Non-Publication			Certificate of Correction Fee
Request to Rescind Non-P	ublication Request		
Terminal Disclaimer	•		Maintenance Fee
Notice of Appeal			
	/ Reply Brief (in triplicate)		Other Fees (Describe)
Request for Oral Hearing			
Confirmation of Hearing Pe	etition		
Issue Fee Transmittal			
Yellow Filing Receipt		720.00	Total Fees Paid
Maintenance Fee Transmit	tal		
Status Inquiry		Char	rge the above fees as follows:
Other: (Please describe	below)		
		_ X USPTO	Deposit Account No. 22-0261
		USPTO	Deposit Account No.
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Reviewed By:	July July July July July July July July		3/26/08
Signature of	Netornov	Date	, t